D NOV PATER	TRANSMITTAL FORM (to be used for all correspondence after initial filing)			First Named Inventor Art Unit Examiner Name Attorney Docket Number	rademark Offici	PTO/SB/2# (08-03) use through 08/30/2003. OMP/0651-0031 be; U.S. DEPARTMENT OF COMMERCE is it displays a valid OMB control number.					
	Total Number of Pa	iges in This Submission	0.12.001								
! .	ENCLOSURES (Check all that apply)										
	Amendment After Affid Extension of Express Aba Information Certified Co Document(s Response to Incomplete	Attached //Reply r Final avits/declaration(s) f Time Request andonment Request Disclosure Statement py of Priority o Missing Parts/		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) RKS			fter Allowance communication (Technology Center (TC) (TC) (Technology Center (TC) (Technology Center (
		SIGNA	TURE C	F APPLICANT, ATTORN	EY, C	R AGENT					
	Firm or Individual name Diane E. Burke Mueller and Smith, LPA Signature Diane E. Burke Mueller and Smith, LPA										
				urka							
	Date N	ovember 7, 2003									
	I hereby certify that sufficient postage as the date shown belo	this correspondence is b s first class mail in an en	eing facsi	CATE OF TRANSMISSION mile transmitted to the USPTO of dressed to: Commissioner for Pa	r depos	ited with the	United S 0, Alexa	States Postal Service with ndria, VA 22313-1450 on			
	Typed or printed na	Jane Keeney	7/	nen			Date	November 7, 2003			

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PTO/SB/17 (11-01)

Approved for use through 10/31/2002. OMB 0651-0032

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ork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

THE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 640.00

С	mpl t if Known	
Application Number	09/954,788	RECEIVED
Filing Date	18 Sept 2001	_
First Named Inventor	Nester Kolcio	NOV 1 4 2003
Examiner Name	Katherine M. Мо	oran CHNOLOGY CENTER R3700
Group Art Unit	3765	CHNOLOGY CENTER R3700
Attorney Docket No.	UPI 2-001	7

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)							
X Check	3. ADDITIONAL FEES										
Check Credit card Money Other None Deposit Account:				Large Entity Small Entity							
Deposit	Account.	13-4830	Fee Cod	Fee e (\$)	Fee Cod	Fee e (\$)	Fee Description	Fee Paid			
Account Number		13-4650	105	130	205	65	Surcharge - fate filing fee or oath				
Deposit Account Name	Muell	er and Smith, LPA	127	50	227	25	Surcharge - late provisional filing fee or cover sheet				
The Commiss	139	130	139	130	Non-English specification						
	(s) indicated be		147	2,520	147	2.520	For filing a request for ex parte reexamination				
	·	s) during the pendency of this application	112	920*	112	920*	Requesting publication of SIR prior to				
· ·		low, except for the filing fee					Examiner action				
to the above id		ALCULATION	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action				
1. BASIC F		ALCOLATION	115	110	215	55	Extension for reply within first month				
	Small Entity		116	400	216	200	Extension for reply within second month	477.00			
Fee Fee	Fee Fee	Fee Description Fee Paid	117	920	217	460	Extension for reply within third month	475.00			
Code (\$) 101 740	Code (\$) 201 370	Utility filing fee	118	1,440	218	720	Extension for reply within fourth month				
106 330	206 165	Design filing fee	128	1,960	228	980	Extension for reply within fifth month				
107 510	207 255	Plant filing fee	119	320	219	160	Notice of Appeal	165.00			
108 740	208 370	Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal				
114 160	214 80	Provisional filing fee	121	280	221	140	Request for oral hearing				
l '	•	SUBTOTAL (1) (6)	138	1,510	138	1,510	Petition to institute a public use proceeding				
SUBTOTAL (1) (\$)				110	240	55	Petition to revive - unavoidable				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				1,280	241	640	Petition to revive - unintentional				
		Extra Claims below Fee Paid		1,280	242	640	Utility issue fee (or reissue)				
Total Claims Independent	-20		143	460	243	230	Design issue fee Plant issue fee				
Claims Multiple Deper			144 122	620 130	122	310 130	Petitions to the Commissioner				
Muluple Depel	ident	(123	50	123	50	Processing fee under 37 CFR 1.17(g)				
Large Entity	Small Entity		123	180	126	180	Submission of Information Disclosure Stmt				
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description				40					
103 18	203 9	Claims in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)				
102 84	202 42	Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))				
104 280	204 140	Multiple dependent claim, if not paid	149	740	249	370	For each additional invention to be				
109 84	209 42	** Reissue independent claims over original patent					examined (37 CFR § 1.129(b))				
110 18	210 9	** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)	 			
		and over original patent	169	900	169	900	Request for expedited examination of a design application				
SUBTOTAL (2) (\$)				Other fee (specify)							
**or number previously paid, if greater; For Reissues, see above				*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 640.00							

SUBMITTED BY		Complete (if	Complete (if applicable)		
Name (Print/Type)	Diane E. Burke	Registration No. (Attorney/Agent)	45,725	Telephone	(614) 436-0600
Signature	Dant.	Burke		Date	November 7, 2003

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